

2 **H. B. 2906**

3
4 (By Delegates Brown, D. Poling, Fleischauer and Talbott)
5 [Introduced January 27, 2011; referred to the Committee
6 on Health and Human Resources then the Judiciary.]
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10 A BILL to amend and reenact article 9, chapter 64 of the Code of
11 West Virginia, 1931, as amended, relating to authorizing the
12 Board of Optometry to promulgate a legislative rule relating
13 to oral pharmaceutical prescriptive authority.

14 *Be it enacted by the Legislature of West Virginia:*

15 That article 9, chapter 64 of the Code of West Virginia, 1931,
16 as amended, be amended and reenacted to read as follows:

17 **ARTICLE 9. AUTHORIZATION FOR MISCELLANEOUS AGENCIES AND BOARDS TO**
18 **PROMULGATE LEGISLATIVE RULES.**

19 **§64-9-1. Board of Optometry.**

20 The legislative rule filed in the state register on the
21 thirtieth day of July, two thousand ten, authorized under the
22 authority of section six, article eight, chapter thirty, of this
23 code, modified by the Board of Optometry to meet the objections of
24 the Legislative Rule-Making Review Committee and refiled in the
25 state register on the third day of January, two thousand eleven,

1 relating to the Board of Optometry (oral pharmaceutical
2 prescriptive authority, 14 CSR 2), is authorized with the following
3 amendments:

4 On page three, subsection 9.2, by striking the period
5 inserting a comma and adding the following, "and include hands-on
6 supervised clinical training.";

7 On page four, subsection 10.2, after the words "standards of"
8 by inserting the words, "education and";

9 On page four, by adding a new subsection 10.3 to read as
10 follows. "10.3 A new oral drug used for a new indication may not
11 be started on a patient until discussed with the patient's
12 osteopathic or allopathic physician, and documented in the
13 patient's record, in order to identify and minimize potential
14 adverse reactions and drug interactions.";

15 And,

16 On page four, by adding a new subsection 10.4 to read as
17 follows. "10.4 If the patient does not have a primary care
18 provider or refuses to provide written permission to report the
19 oral drug(s) to his or her primary care provider the certificate
20 holder may provide a written statement to the patient regarding the
21 oral drug(s) administered with instruction to the patient to give
22 the listed information to his or her current primary care provider
23 or any primary care provider they would choose to see in the
24 future.".

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1 NOTE: The purpose of this bill is to authorize the Board of
2 Optometry to promulgate a legislative rule relating to Oral
3 Pharmaceutical Prescriptive Authority.
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5 This section is new; therefore, strike-throughs and
6 underscoring have been omitted.